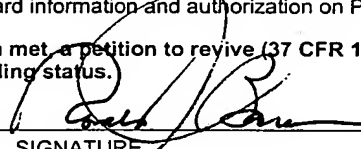
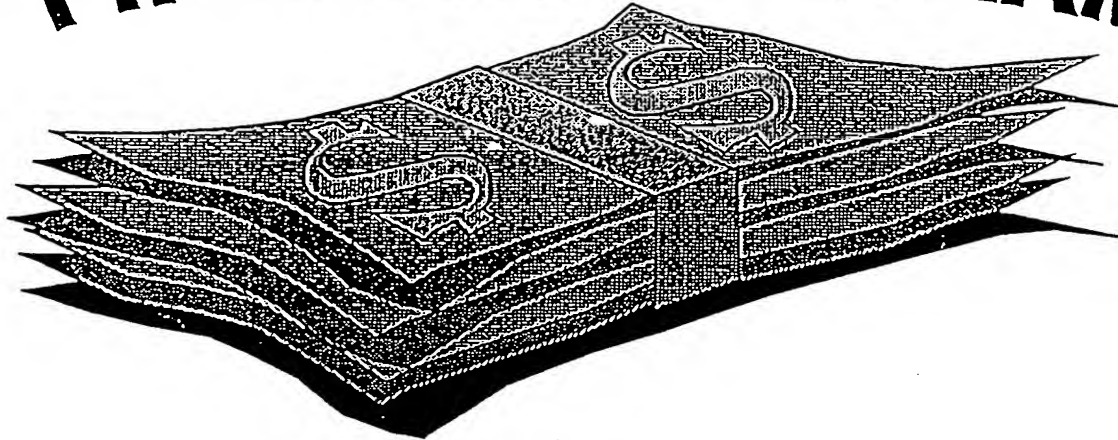


FORM PTO-1390 (Modified) U.S. PATENT AND TRADEMARK OFFICE; U.S. DEPARTMENT OF COMMERCE (REV. 12-2004)		ATTORNEY'S DOCKET NUMBER 294-207 PCT/US
<b>TRANSMITTAL LETTER TO THE UNITED STATES          DESIGNATED/ELECTED OFFICE (DO/EO/US)          CONCERNING A SUBMISSION UNDER 35 U.S.C. 371</b>		U.S. APPLICATION NO. (If known, see 37 CFR 1.5) <div style="font-size: 1.5em; font-weight: bold;">10/521126</div>
INTERNATIONAL APPLICATION NO. PCT/NL2003/000519	INTERNATIONAL FILING DATE 16 July 2003	PRIORITY DATE CLAIMED 16 July 2002
TITLE OF INVENTION Biodegradable Phase Separated Segmented Multi Block Co-Polymers		
APPLICANT(S) FOR DO/EO/US Catharina Everdina Hissink; Ronald Meyboom; and Theodorus Adrianus Cornelius Flipsen		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
<ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> This is a <b>FIRST</b> submission of items concerning a submission under 35 U.S.C. 371.</li> <li>2. <input type="checkbox"/> This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a submission under 35 U.S.C. 371.</li> <li>3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (24) indicated below.</li> <li>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).</li> <li>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2))           <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).</li> <li>b. <input checked="" type="checkbox"/> has been communicated by the International Bureau.</li> <li>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</li> </ol> </li> <li>6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).           <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> is attached hereto.</li> <li>b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</li> </ol> </li> <li>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))           <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau).</li> <li>b. <input type="checkbox"/> have been communicated by the International Bureau.</li> <li>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.</li> <li>d. <input checked="" type="checkbox"/> have not been made and will not be made.</li> </ol> </li> <li>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</li> <li>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).</li> <li>10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).</li> <li>11. <input checked="" type="checkbox"/> A copy of the International Preliminary Examination Report (PCT/IPEA/409).</li> <li>12. <input checked="" type="checkbox"/> A copy of the International Search Report (PCT/ISA/210).</li> </ol> <p>Items 13 to 23 below concern document(s) or information included:</p> <ol style="list-style-type: none"> <li>13. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</li> <li>14. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</li> <li>15. <input checked="" type="checkbox"/> A <b>FIRST</b> preliminary amendment.</li> <li>16. <input type="checkbox"/> A <b>SECOND</b> or <b>SUBSEQUENT</b> preliminary amendment.</li> <li>17. <input type="checkbox"/> A substitute specification.</li> <li>18. <input type="checkbox"/> A power of attorney and/or change of address letter.</li> <li>19. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.</li> <li>20. <input checked="" type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4).</li> <li>21. <input type="checkbox"/> A second copy of the English language translation of the International Application under 35 U.S.C. 154(d)(4).</li> <li>22. <input checked="" type="checkbox"/> Express Mail Label No. <b>EL 769581304 US</b></li> <li>23. <input type="checkbox"/> Other items or information:</li> </ol>		
<div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>EXPRESS MAIL CERTIFICATE</b>            Date: <u>12 Jan 2005</u> Label No. <u>EL 769581304 US</u>            I hereby certify that on the date indicated above, I deposited this paper or fee with the U.S. Postal Service and that it was addressed for delivery to Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450 by "EXPRESS MAIL," Post Office to Addressee Service.  <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="text-align: center;"> <u>Joan M. Irving</u>  <small>Name (P.int)</small> </div> <div style="text-align: center;"> <u>Joan M. Irving</u>  <small>Signature</small> </div> </div> </div> </div>		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. APPLICATION NO. (if known, see 37 CFR 1.5)		INTERNATIONAL APPLICATION NO.		ATTORNEY'S DOCKET NUMBER	
107521126		PCT/NL2003/000519		294-207 PCT/US	
24. The following fees are submitted:				Applicant use	Office use
<input checked="" type="checkbox"/> a) Basic national fee .....				\$300.00	
<input checked="" type="checkbox"/> b) Examination fee .....				\$200.00	
<input checked="" type="checkbox"/> c) Search fee .....				\$500.00	
<b>TOTAL OF ABOVE CALCULATIONS =</b>				\$1000.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole)	RATE		
42 - 100 =	0 /50 =	0	x \$250.00	\$0.00	
Surcharge of \$130.00 for furnishing the oath or declaration later than months from the earliest claimed priority date (37 CFR 1.492(e)).				\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	30 - 20 =	10	x \$50.00	\$500.00	
Independent claims	1 - 3 =	0	x \$200.00	\$0.00	
MULTIPLE DEPENDENT CLAIMS (if applicable) <input type="checkbox"/> + \$360.00				\$0.00	
<b>TOTAL OF ABOVE CALCULATIONS =</b>				\$1,500.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.				\$0.00	
<b>SUBTOTAL =</b>				\$1,500.00	
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				\$0.00	
<b>TOTAL NATIONAL FEE =</b>				\$1,500.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40 per property +				\$0.00	
<b>TOTAL FEES ENCLOSED =</b>				\$1,500.00	
Amount to be refunded:				\$	
Amount to be charged:				\$	
a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>\$1,500.00</u> to cover the above fees is enclosed.					
b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of _____ to cover the above fees. A duplicate copy of this sheet is					
c. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>08-2461</u> . A duplicate copy of this sheet is enclosed.					
d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
<b>NOTE:</b> Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.					
SEND ALL CORRESPONDENCE TO:					
Ronald J. Baron, Esq. Hoffmann & Baron, LLP 6900 Jericho Turnpike Syosset, New York 11791 United States of America Telephone: 516-822-3550/Facsimile: 516-822-3582			Date: January 12, 2005 Customer No: 23869		
			SIGNATURE  Ronald J. Baron		
			NAME 29,281		
			REGISTRATION NUMBER		

# SPECIAL REQUEST FOR FINANCE/RAM TEAM



TO: PCT RAM TEAM CP2/5<sup>TH</sup> FLOOR

PLEASE PROCESS THE FOLLOWING ADJUSTMENTS:

FROM

TO

CODE	FEE AMOUNT	CODE	FEE AMOUNT
<u>1632</u>	<u>500</u>	<u>1642</u>	<u>400</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ER:

☐ CHARGE VOUCHER IS ATTACHED TO CHARGE / REFUND  
ADDITIONAL FEES

☐ OTHER: \_\_\_\_\_

THE ORIGINAL METHOD OF PAYMENT WAS

☐ BY A CHECK

☒ BY A CHARGE TO DEPOSIT ACCOUNT NO. 08-2461

REQUESTED BY:

Larry M. Johnson Vessels

DATE: \_\_\_\_\_

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: \_\_\_\_\_

2 Serial/Patent # 10/521126

3 Please refund the following fee(s):

4 PAPER  
NUMBER

5 DATE  
FILED

6 AMOUNT



Filing

\$ 100

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT  
OF REFUND

\$ 100

8 TO BE REFUNDED BY:

10 REASON:



Overpayment

Treasury Check

Duplicate Payment

Credit Deposit A/C #:

No Fee Due (Explanation):

9 08--2461

*Rule change - 08 Dec 2004*

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:

TITLE: Supervisor

SIGNATURE: Larry M. Johnson

PHONE: 703-308-9140

OFFICE: DOED

X221

\*\*\*\*\*  
THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: \_\_\_\_\_

DATE: \_\_\_\_\_

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*